

Label (See instructions.) Use the IRS label. Otherwise, please print or type. Presidential Election Campaign	For the year Jan. 1 - Dec. 31, 2008, or other tax year beginning , 2008, ending , 20		OMB No. 1545-0047
	Your first name MI Last name CAROL ANN ALVARADO		Your social security number [REDACTED]
	If a joint return, spouse's first name MI Last name		Spouse's social security number
	Home address (number and street). If you have a P.O. box, see instructions. Apartment no. [REDACTED]		You must enter your social security number(s) above. ▲
City, town or post office. If you have a foreign address, see instructions. State ZIP code HOUSTON, TX [REDACTED]			
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions). <input type="checkbox"/> You <input type="checkbox"/> Spouse			

Filing Status

1	<input checked="" type="checkbox"/>	Single	4	<input type="checkbox"/>	Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here ▶
2	<input type="checkbox"/>	Married filing jointly (even if only one had income)			
3	<input type="checkbox"/>	Married filing separately. Enter spouse's SSN above & full name here ▶	5	<input type="checkbox"/>	Qualifying widow(er) with dependent child (see instructions)

Check only one box.

Exemptions

6a	<input checked="" type="checkbox"/>	Yourself. If someone can claim you as a dependent, do not check box 6a.	Boxes checked on 6a and 6b.	1																									
b	<input type="checkbox"/>	Spouse	No. of children on 6c who:																										
c Dependents: <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">(1) First name</th> <th style="width:20%;">Last name</th> <th style="width:20%;">(2) Dependent's social security number</th> <th style="width:20%;">(3) Dependent's relationship to you</th> <th style="width:10%;">(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instrs)</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> </tbody> </table>			(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instrs)					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/> lived with you. . . . <input type="checkbox"/> did not live with you due to divorce or separation (see instrs). . . Dependents on 6c not entered above. Add numbers on lines above ▶	
			(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instrs)																						
							<input type="checkbox"/>																						
							<input type="checkbox"/>																						
				<input type="checkbox"/>																									
				<input type="checkbox"/>																									
d Total number of exemptions claimed.				1																									

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2.	7	
8a Taxable interest. Attach Schedule B if required.	8a	121.
b Tax-exempt interest. Do not include on line 8a.	8b	
9a Ordinary dividends. Attach Schedule B if required.	9a	
b Qualified dividends (see instrs).	9b	
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions).	10	
11 Alimony received.	11	
12 Business income or (loss). Attach Schedule C or C-EZ.	12	125,637.
13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here ▶ <input type="checkbox"/>	13	
14 Other gains or (losses). Attach Form 4797.	14	
15a IRA distributions.	15a	
b Taxable amount (see instrs).	15b	
16a Pensions and annuities.	16a	
b Taxable amount (see instrs).	16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E.	17	
18 Farm income or (loss). Attach Schedule F.	18	
19 Unemployment compensation.	19	
20a Social security benefits.	20a	
b Taxable amount (see instrs).	20b	
21 Other income.	21	
22 Add the amounts in the far right column for lines 7 through 21. This is your total income.	22	125,758.

Adjusted Gross Income

23 Educator expenses (see instructions).	23		
24 Certain business expenses of reservists, performing artists, and fee-based government officials. Attach Form 2106 or 2106-EZ.	24		
25 Health savings account deduction. Attach Form 8889.	25		
26 Moving expenses. Attach Form 3903.	26		
27 One-half of self-employment tax. Attach Schedule SE.	27	8,007.	
28 Self-employed SEP, SIMPLE, and qualified plans.	28	5,000.	
29 Self-employed health insurance deduction (see instructions).	29		
30 Penalty on early withdrawal of savings.	30		
31a Alimony paid b Recipient's SSN	31a		
32 IRA deduction (see instructions).	32		
33 Student loan interest deduction (see instructions).	33		
34 Tuition and fees deduction. Attach Form 8917.	34		
35 Domestic production activities deduction. Attach Form 8803.	35		
36 Add lines 23 - 31a and 32 - 35.	36	13,007.	
37 Subtract line 36 from line 22. This is your adjusted gross income.	37	112,751.	

Tax and Credits**Standard Deduction for**

• People who checked any box on line 39a, 39b, or 39c or who can be claimed as a dependent, see instructions.

• All others:

Single or Married filing separately, \$5,450

Married filing jointly or Qualifying widow(er), \$10,900

Head of household, \$8,000

38	Amount from line 37 (adjusted gross income)	38	112,751.
39a	Check if: <input type="checkbox"/> You were born before January 2, 1944. <input type="checkbox"/> Blind. Total boxes checked 39a		
	<input type="checkbox"/> Spouse was born before January 2, 1944. <input type="checkbox"/> Blind. 39b		
	39c		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	24,791.
41	Subtract line 40 from line 38	41	87,960.
42	If line 38 is over \$119,975, or you provided housing to a Midwestern displaced individual, see instructions. Otherwise, multiply \$3,500 by the total number of exemptions claimed on line 6d	42	3,500.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	84,460.
44	Tax (see instructions). Check if any tax is from: a <input type="checkbox"/> Form(s) 9814 b <input type="checkbox"/> Form 9972	44	17,631.
45	Alternative minimum tax (see instructions). Attach Form 6251	45	0.
46	Add lines 44 and 45	46	17,631.
47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Credit for the elderly or the disabled. Attach Schedule R	49	
50	Education credits. Attach Form 8863	50	
51	Retirement savings contributions credit. Attach Form 8880	51	
52	Child tax credit (see instructions). Attach Form 8801 if required	52	
53	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8350 c <input type="checkbox"/> 5695	53	
54	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 6801 c <input type="checkbox"/>	54	
55	Add lines 47 through 54. These are your total credits	55	
56	Subtract line 55 from line 46. If line 55 is more than line 46, enter -0-	56	17,631.
57	Self-employment tax. Attach Schedule SE	57	16,013.
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
60	Additional taxes: a <input type="checkbox"/> AEC payments b <input type="checkbox"/> Household employment taxes. Attach Schedule H	60	
61	Add lines 56-60. This is your total tax	61	33,644.
62	Federal income tax withheld from Forms W-2 and 1099	62	
63	2008 estimated tax payments and amount applied from 2007 return	63	8,972.
64a	Earned income credit (EIC)	64a	
	b Nontaxable combat pay election 64b		
65	Excess social security and tier 1 RRTA tax withheld (see instructions)	65	
66	Additional child tax credit. Attach Form 8812	66	
67	Amount paid with request for extension to file (see instructions)	67	
68	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4135 c <input type="checkbox"/> 8301 d <input type="checkbox"/> 8885	68	
69	First-time homebuyer credit. Attach Form 5405	69	
70	Recovery rebate credit (see worksheet)	70	
71	Add lines 62 through 70. These are your total payments	71	8,972.
72	If line 71 is more than line 61, subtract line 61 from line 71. This is the amount you overpaid	72	
73a	Amount of line 72 you want refunded to you. If Form 8878 is attached, check here 73a		
	b Routing number c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d Account number		
74	Amount of line 72 you want applied to your 2009 estimated tax 74		
75	Amount you owe. Subtract line 71 from line 61. For details on how to pay, see instructions	75	24,672.
76	Estimated tax penalty (see instructions) 76		

Other Taxes**Payments**

If you have a qualifying child, attach Schedule EIC.

Refund

Direct deposit? See instructions and fill in 73b, 73c, and 73d on Form 8878.

Amount You Owe**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☒ Yes. Complete the following. ☐ No

Designee's name **Preparer** Phone no. Personal identification number (PIN)

Sign Here

Joint return? See instructions.

Keep a copy for your records.

Your signature **Taxpayer Copy** Date Your occupation **CONSULTANT** Daytime phone number
 Spouse's signature (if a joint return, both must sign) Date Spouse's occupation

Paid Preparer's Use Only

Preparer's signature **S For L** Date **4/13/09** Check if self-employed ☐ Preparer's SSN or PIN
 Firm's name (or yours if self-employed) **FORTSON & COMPANY, P.C.** EIN
 address, and ZIP code **HOUSTON, TX** Phone no.

Label
(See instructions.)Use the
IRS label.
Otherwise,
please print
or type.Presidential
Election
Campaign

For the year Jan 1 - Dec 31, 2009, or other tax year beginning , 2009, ending , 20		CMB No. 1545-0074
Your first name CAROL ANN ALVARADO	MI Last name	Your social security number [REDACTED]
If a joint return, spouse's first name	MI Last name	Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. [REDACTED]		You must enter your social security number(s) above.
Apartment no.		
City, town or post office. If you have a foreign address, see instructions. HOUSTON, TX [REDACTED]		Checking a box below will not change your tax or refund.
State ZIP code		
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions)		<input type="checkbox"/> You <input type="checkbox"/> Spouse

Filing Status

- 1 ☒ Single
- 2 ☐ Married filing jointly (even if only one had income)
- 3 ☐ Married filing separately. Enter spouse's SSN above & full name here.
- 4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here.
- 5 ☐ Qualifying widow(er) with dependent child (see instructions)

Check only one box.

Exemptions

6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a	Boxes checked on 6a and 6b	1
b <input type="checkbox"/> Spouse.	No. of children on 6c who:	
	• lived with you	
	• did not live with you due to divorce or separation (see instrs)	
	Dependents on 6c not entered above	
	Add numbers on lines above	1
d Total number of exemptions claimed		

If more than four dependents, see instructions and check here ☐

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	6,750.
8a Taxable interest. Attach Schedule B if required.	8a	116.
b Tax-exempt interest. Do not include on line 8a	8b	
9a Ordinary dividends. Attach Schedule B if required	9a	
b Qualified dividends (see instrs)	9b	
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	10	
11 Alimony received	11	
12 Business income or (loss). Attach Schedule C or C-EZ	12	97,831.
13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here	13	
14 Other gains or (losses). Attach Form 4797	14	
15a IRA distributions	15a	
b Taxable amount (see instrs)	15b	
16a Pensions and annuities	16a	
b Taxable amount (see instrs)	16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18 Farm income or (loss). Attach Schedule F	18	
19 Unemployment compensation in excess of \$2,400 per recipient (see instructions)	19	
20a Social security benefits	20a	
b Taxable amount (see instrs)	20b	
21 Other income	21	
22 Add the amounts in the far right column for lines 7 through 21. This is your total income.	22	104,697.
23 Educator expenses (see instructions)	23	
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25 Health savings account deduction. Attach Form 8889	25	
26 Moving expenses. Attach Form 3903	26	
27 One-half of self-employment tax. Attach Schedule SE	27	6,912.
28 Self-employed SEP, SIMPLE, and qualified plans	28	5,000.
29 Self-employed health insurance deduction (see instructions)	29	
30 Penalty on early withdrawal of savings	30	
31a Alimony paid b Recipient's SSN	31a	
32 IRA deduction (see instructions)	32	
33 Student loan interest deduction (see instructions)	33	
34 Tuition and fees deduction. Attach Form 8917	34	
35 Domestic production activities deduction. Attach Form 8809	35	
36 Add lines 23 - 31a and 32 - 35	36	11,912.
37 Subtract line 36 from line 22. This is your adjusted gross income	37	92,785.

Adjusted
Gross
Income

Tax and Credits**Standard Deduction for —**

• People who check any box on line 39a, 39b, or 40b or who can be claimed as a dependent, see instructions.

• All others:

Single or Married filing separately, \$5,700

Married filing jointly or Qualifying widow(er), \$11,400

Head of household, \$9,350

38 Amount from line 37 (adjusted gross income) 38

92,785.

39a Check ☐ You were born before January 2, 1945. ☐ Blind. Total boxes checked ☐ 39ab If your spouse itemizes on a separate return, or you were a dual-status alien, see instructions and check here ☐ 39b

40a Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40a

21,539.

b If you are increasing your standard deduction by certain real estate taxes, new motor vehicle taxes, or a net disaster loss, attach Schedule L and check here (see instructions) ☐ 40b

41 Subtract line 40a from line 38. 41

71,246.

42 Exemptions. If line 38 is \$125,000 or less and you did not provide housing to a Midwestern displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see instructions. 42

3,650.

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-. 43

67,596.

44 Tax (see instrs). Check if any tax is from: a ☐ Form(s) 9814 b ☐ Form 4972 44

13,081.

45 Alternative minimum tax (see instructions). Attach Form 6251. 45

0.

46 Add lines 44 and 45. 46

13,081.

47 Foreign tax credit. Attach Form 1116 if required. 47

48 Credit for child and dependent care expenses. Attach Form 2441. 48

49 Education credits from Form 8863, line 29. 49

50 Retirement savings contributions credit. Attach Form 8880. 50

51 Child tax credit (see instructions). 51

52 Credits from Form: a ☐ 8336 b ☐ 8839 c ☐ 5695 5253 Other trs from Form: a ☐ 3300 b ☐ 8801 c ☐ 53

54 Add lines 47 through 53. These are your total credits. 54

55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-. 55

13,081.

56 Self-employment tax. Attach Schedule SE. 56

13,823.

57 Unreported social security and Medicare tax from Form: a ☐ 4137 b ☐ 8819. 57

58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required. 58

59 Additional taxes: a ☐ AEIC payments b ☐ Household employment taxes. Attach Schedule H. 59

60 Add lines 55-59. This is your total tax. 60

26,904.

Other Taxes**Payments**

61 Federal income tax withheld from Forms W-2 and 1099. 61

297.

62 2009 estimated tax payments and amount applied from 2008 return. 62

21,500.

63 Making work pay and government retiree credit. Attach Schedule M. 63

44.

64a Earned income credit (EIC). 64a

b Nonrefundable combat pay election. ☐ 64b

65 Additional child tax credit. Attach Form 8812. 65

66 Refundable education credit from Form 8863, line 16. 66

67 First-time homebuyer credit. Attach Form 5405. 67

68 Amount paid with request for extension to file (see instructions). 68

69 Excess social security and tier 1 RRTA tax withheld (see instructions). 69

70 Credits from Form: a ☐ 2439 b ☐ 4136 c ☐ 8801 d ☐ 8895 70

71 Add lines 61-63, 64a, & 65-70. These are your total payments. 71

21,841.

Refund

Direct deposit? See instructions and fill in 73b, 73c, and 73d on Form 8888.

72 If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid. 72

73a Amount of line 72 you want refunded to you. If Form 8888 is attached, check here, ☐ 73ab Routing number. ☐ c Type: ☐ Checking ☐ Savingsd Account number. ☐

74 Amount of line 72 you want applied to your 2010 estimated tax. 74

75 Amount you owe. Subtract line 71 from line 60. For details on how to pay, see instructions. 75

5,227.

76 Estimated tax penalty (see instructions). 76

164.

Third Party DesigneeDo you want to allow another person to discuss this return with the IRS (see instructions)? ☒ Yes. Complete the following. ☐ NoDesignee's name ☐ STANLEY S FORTSONPhone no. ☐Personal identification number (PIN) ☐**Sign Here**

Joint return? See instructions.

Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature ☐Date ☐Your occupation ☐ CONSULTANTDaytime phone number ☐Spouse's signature. If a joint return, both must sign. ☐Date ☐Spouse's occupation ☐**Paid Preparer's Use Only**Preparer's signature ☐Date ☐ 10/14/10Check if self-employed ☐Preparer's SSN or PTIN ☐Firm's name (or yours if self-employed) ☐ FORTSON & COMPANY, P.C.Address and ZIP code ☐ HOUSTON, TX ☐EIN ☐Phone no. ☐

See Statement 1

5,482.

Form 1040 (2009)

Name,
Address,
and SSNSee separate
instructions.Presidential
Election
Campaign

For the year Jan 1 - Dec 31, 2010, or other tax year beginning , 2010, ending , 20	
Year last name	MI Last name
CAROL ANN ALVARADO	
If a joint return, spouse's first name	MI Last name
Home address (number and street). If you have a P.O. box, see instructions.	
Apartment no.	
City, town or post office. If you have a foreign address, see instructions.	
State ZIP code	
HOUSTON, TX	

OMB No. 1545-0047
Your social security number
Spouse's social security number
Make sure the SSN(s) above and on line 6c are correct.
Checking a box below will not change your tax or refund.

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? ☐ You ☐ Spouse

Filing Status

- 1 ☒ Single
- 2 ☐ Married filing jointly (even if only one had income)
- 3 ☐ Married filing separately. Enter spouse's SSN above & full name here.
- 4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here.
- 5 ☐ Qualifying widow(er) with dependent child

Check only
one box

Exemptions

6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a.	Boxes checked on 6a and 6b	1
b <input type="checkbox"/> Spouse	No. of children on 6c who:	
	• lived with you	
	• did not live with you due to divorce or separation (see instructions)	
	Dependents on 6c not entered above.	
	Add numbers on lines above	1

If more than four dependents, see instructions and check here. ☐

d Total number of exemptions claimed

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	7,025.
8a Taxable interest. Attach Schedule B if required	8a	50.
b Tax-exempt interest. Do not include on line 8a	8b	
9a Ordinary dividends. Attach Schedule B if required	9a	
b Qualified dividends	9b	
10 Taxable refunds, credits, or offsets of state and local income taxes	10	
11 Alimony received	11	
12 Business income or (loss). Attach Schedule C or C-EZ	12	128,270.
13 Capital gain or (loss). Att Sch D not reqd. If not reqd, ck here	13	
14 Other gains or (losses). Attach Form 4797	14	
15a IRA distributions	15a	
b Taxable amount	15b	
16a Pensions and annuities	16a	
b Taxable amount	16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18 Farm income or (loss). Attach Schedule F	18	
19 Unemployment compensation	19	
20a Social security benefits	20a	
b Taxable amount	20b	
21 Other income	21	
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income	22	135,345.

Attach Form(s)
W-2 here. Also
attach Forms
W-2G and 1099-R
if tax was withheld.If you did not
get a W-2,
see instructions.Enclose, but do
not attach, any
payment. Also,
please use
Form 1040-V.Adjusted
Gross
Income

23 Educator expenses	23	
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25 Health savings account deduction. Attach Form 8889	25	
26 Moving expenses. Attach Form 3903	26	
27 One-half of self-employment tax. Attach Schedule SE	27	7,864.
28 Self-employed SEP, SIMPLE, and qualified plans	28	5,000.
29 Self-employed health insurance deduction	29	
30 Penalty on early withdrawal of savings	30	
31a Alimony paid b Recipient's SSN	31a	
32 IRA deduction	32	
33 Student loan interest deduction	33	
34 Tuition and fees. Attach Form 8917	34	
35 Domestic production activities deduction. Attach Form 8903	35	
36 Add lines 23 - 31a and 32 - 35	36	12,864.
37 Subtract line 36 from line 22. This is your adjusted gross income	37	122,481.

Tax and Credits

38	Amount from line 37 (adjusted gross income)	38	122,481.
39a	Check <input type="checkbox"/> You were born before January 2, 1946, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a <input type="checkbox"/> Spouse was born before January 2, 1946, <input type="checkbox"/> Blind. <input type="checkbox"/> 39b <input type="checkbox"/>		
b If your spouse itemizes on a separate return, or you were a dual status alien, check here <input type="checkbox"/> 39b <input type="checkbox"/>			
40	Itemized deductions (from Schedule A) or your standard deduction (see instructions)	40	21,540.
41	Subtract line 40 from line 38	41	100,941.
42	Exemptions. Multiply \$3,650 by the number on line 6d	42	3,650.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	97,291.
44	Tax (see instrs). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	20,946.
45	Alternative minimum tax (see instructions). Attach Form 6251	45	0.
46	Add lines 44 and 45	46	20,946.
47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Education credits from Form 8863, line 23	49	
50	Retirement savings contributions credit. Attach Form 8880	50	
51	Child tax credit (see instructions)	51	
52	Residential energy credits. Attach Form 5695	52	
53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
54	Add lines 47 through 53. These are your total credits	54	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	20,946.

Other Taxes

56	Self-employment tax. Attach Schedule SE	56	15,727.
57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8915	57	
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
59a	<input type="checkbox"/> Form(s) W-2, box 9 b <input type="checkbox"/> Schedule H c <input type="checkbox"/> Form 5405, line 16	59	
60	Add lines 56-59. This is your total tax	60	36,673.

Payments

If you have a qualifying child, attach Schedule EIC.

61	Federal income tax withheld from Forms W-2 and 1099	61	98.
62	2010 estimated tax payments and amount applied from 2009 return	62	18,000.
63	Making work pay credit. Attach Schedule M	63	
64a	Earned income credit (EIC)	64a	
b Nonrefundable rental pay election <input type="checkbox"/> 64b <input type="checkbox"/>			
65	Additional child tax credit. Attach Form 8812	65	
66	American opportunity credit from Form 8863, line 14	66	
67	First-time homebuyer credit from Form 5405, line 10	67	
68	Amount paid with request for extension to file	68	
69	Excess social security and tier 1 FICA tax withheld	69	
70	Credit for federal tax on fuels. Attach Form 4136	70	
71	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 8829 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	71	
72	Add lines 61-63, 64a, & 65-71. These are your total payments	72	18,098.

Refund

73	If line 72 is more than line 60, subtract line 60 from line 72. This is the amount you overpaid	73	
74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/> 74a <input type="checkbox"/>		
b Routing number <input type="checkbox"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings			

Direct deposit? See instructions.

75	Amount of line 73 you want applied to your 2011 estimated tax	75	
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Amount You Owe

76	Amount you owe. Subtract line 72 from line 60. For details on how to pay see instructions	76	18,872.
77	Estimated tax penalty (see instructions)	77	297.

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☒ Yes. Complete below. ☐ No

Third Party Designee

Designee's name **STANLEY S FORTSON** Phone no. **[REDACTED]** Personal identification number (PIN) **[REDACTED]**

Sign Here

Joint return? See instructions.

Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	
Your signature Stanley S Fortson	Your occupation CONSULTANT
Spouse's signature. If a joint return, both must sign.	Spouse's occupation

Print/Type preparer's name STANLEY S FORTSON	Preparer's signature [Signature]	Date 10/14/11	Check <input type="checkbox"/> a <input type="checkbox"/> self-employed <input type="checkbox"/> PIN [REDACTED]
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Paid Preparer's Use Only

Firm's name FORTSON & COMPANY, P.C.	Firm's EIN [REDACTED]
Firm's address HOUSTON, TX [REDACTED]	Phone no. [REDACTED]

See Statement 1

19,805.

Form 1040 (2010)

For the year Jan 1 - Dec 31, 2011, or other tax year beginning , 2011, ending , 20

Your first name **CAROL ANN ALVARADO** MI Last name

If a joint return, spouse's first name MI Last name

Home address (number and street). If you have a P.O. box, see instructions. Apartment no.

City, town or post office. If you have a foreign address, also complete spaces below (see instructions). State ZIP code

Foreign country name Foreign province/county Foreign postal code

Filing Status 1 ☒ Single 4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here 5 ☐ Qualifying widow(er) with dependent child

Check only one box. 2 ☐ Married filing jointly (even if only one had income) 3 ☐ Married filing separately. Enter spouse's SSN above & full name here

Exemptions 6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a. b ☐ Spouse

c Dependents: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) ☒ child under age 17 qualifying for child tax credit (see instructions)

If more than four dependents, see instructions and check here... ☐

d Total number of exemptions claimed. 1

Income 7 Wages, salaries, tips, etc. Attach Form(s) W-2. 7 6,285.

8a Taxable interest. Attach Schedule B if required. 8a 28.

b Tax-exempt interest. Do not include on line 8a. 8b

9a Ordinary dividends. Attach Schedule B if required. 9a

b Qualified dividends. 9b

10 Taxable refunds, credits, or offsets of state and local income taxes. 10

11 Alimony received. 11

12 Business income or (loss). Attach Schedule C or C-EZ. 12 44,502.

13 Capital gain or (loss). Attach Schedule D if req'd. If not req'd, ck here. 13

14 Other gains or (losses). Attach Form 4797. 14

15a IRA distributions. 15a b Taxable amount. 15b

16a Pensions and annuities. 16a b Taxable amount. 16b

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E. 17

18 Farm income or (loss). Attach Schedule F. 18

19 Unemployment compensation. 19

20a Social security benefits. 20a b Taxable amount. 20b

21 Other income. 21

22 Combine the amounts in the far right column for lines 7 through 21. This is your total income. 22 50,815.

Adjusted Gross Income 23 Educator expenses. 23

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ. 24

25 Health savings account deduction. Attach Form 8889. 25

26 Moving expenses. Attach Form 3903. 26

27 Deductible part of self-employment tax. Attach Schedule SE. 27 3,143.

28 Self-employed SEP, SIMPLE, and qualified plans. 28 5,000.

29 Self-employed health insurance deduction. 29

30 Penalty on early withdrawal of savings. 30

31a Alimony paid b Recipient's SSN 31a

32 IRA deduction. 32

33 Student loan interest deduction. 33 737.

34 Tuition and fees. Attach Form 8917. 34

35 Domestic production activities deduction. Attach Form 8903. 35

36 Add lines 23 through 35. 36 8,880.

37 Subtract line 36 from line 22. This is your adjusted gross income. 37 41,935.

Tax and Credits

38 Amount from line 37 (adjusted gross income) 38 41,935.

39a Check ☐ You were born before January 2, 1947. ☐ Blind. Total boxes checked = 39a ☐
☐ Spouse was born before January 2, 1947. ☐ Blind. 39b ☐b If your spouse dies on a separate return or you were a dual-status alien, check here. 39b ☐**Standard Deduction for =**

- People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

- All others. Single or Married filing separately, \$5,800. Married filing jointly or Qualifying widow(er), \$11,600. Head of household, \$8,500.

40 Itemized deductions (from Schedule A) or your standard deduction (see instructions) 40 22,496.

41 Subtract line 40 from line 38. 41 19,439.

42 Exemptions. Multiply \$3,700 by the number on line 6d. 42 3,700.

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter 0. 43 15,739.

44 Tax (see instructions). Check if any from:

a ☐ Form(s) 9814c ☐ 962 electionb ☐ Form 4972 44 1,934.

45 Alternative minimum tax (see instructions). Attach Form 6251. 45 0.

46 Add lines 44 and 45. 46 1,934.

47 Foreign tax credit. Attach Form 1116 if required. 47

48 Credit for child and dependent care expenses. Attach Form 2441. 48

49 Education credits from Form 8863, line 23. 49

50 Retirement savings contributions credit. Attach Form 8880. 50

51 Child tax credit (see instructions). 51

52 Residential energy credits. Attach Form 5695. 52

53 Other credits from Form: a ☐ 3800 b ☐ 8801 c ☐ 53

54 Add lines 47 through 53. These are your total credits. 54

55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-. 55 1,934.

56 Self-employment tax. Attach Schedule SE. 56 5,466.

57 Unreported social security and Medicare tax from Forms a ☐ 4137 b ☐ 8919 57

58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required. 58

59a Household employment taxes from Schedule H. 59a

b First-time homebuyer credit repayment. Attach Form 5405 if required. 59b

60 Other taxes. Enter code(s) from instructions. 60

61 Add lines 55-60. This is your total tax. 61 7,400.

Payments

If you have a qualifying child, attach Schedule EIC.

62 Federal income tax withheld from Forms W-2 and 1099. 62 418.

63 2011 estimated tax payments and amount applied from 2010 return. 63 10,000.

64a Earned income credit (EIC). 64a

b Nonrefundable combat pay election. 64b

65 Additional child tax credit. Attach Form 8812. 65

66 American opportunity credit from Form 8863, line 14. 66

67 First-time homebuyer credit from Form 5405, line 10. 67

68 Amount paid with request for extension to file. 68

69 Excess social security and tier 1 RRTA tax withheld. 69

70 Credit for federal tax on fuels. Attach Form 4136. 70

71 Credits from Form: a ☐ 2439 b ☐ 8329 c ☐ 8801 d ☐ 8883 71

72 Add lines 62, 63, 64a, & 65-71. These are your total pmts. 72 10,418.

Refund

73 If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid. 73 3,018.

74a Amount of line 73 you want refunded to you. If Form 8879 is attached, check here. ☐ 74a 0.b Routing number. ☐ c Type: ☐ Checking ☐ Savings

d Account number.

Direct deposit? See instructions.

75 Amount of line 73 you want applied to your 2012 estimated tax. 75 2,927.

Amount You Owe

76 Amount you owe. Subtract line 75 from line 61. For details on how to pay see instructions. 76

77 Estimated tax penalty (see instructions). 77 91.

Third Party DesigneeDo you want to allow another person to discuss this return with the IRS (see instructions)? ☒ Yes. Complete below. ☐ No

Designee's name: STANLEY S FORTSON

Phone no. [REDACTED]

Personal identification number (PIN) [REDACTED]

Sign Here

Joint return? See instructions.

Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature

Taxpayer Copy

Your occupation

CONSULTANT

Daytime phone number

Spouse's signature, if a joint return, both must sign.

Date

Spouse's occupation

If the IRS sent you an Identity Protection Pin, enter it here (see instructions)

Print/Type preparer's name

Preparer's signature

Date

10/12/12

Check ☐ d

PTA

Paid Preparer's Use Only

STANLEY S FORTSON

Firm's name: FORTSON & COMPANY, P.C.

Firm's address: [REDACTED]

HOUSTON, TX 77004

Firm's EIN: [REDACTED]

Phone no. [REDACTED]